

Serial No.: 10/766,123 Inventor: Holleman TKHR File 11953-1960

CERTIFICATE OF MAILING

I hereby certify that the below listed items are being deposited with the U.S. Postal Service as Express Mail (EV 749202356 US) in an envelope addressed to:

> Mail Stop RCE **Commissioner for Patents** P.O. Box 1450 Alexandria, Virginia 22313-1450

on <u>D2-16</u> .	2006	·
Mary 1	1. Kilgore	•
Mary N. Kilgore	/	

In Re Application of:

Leen Holleman

Serial No.: 10/766,123

Filed: 01-28-2004

For: **Poultry Wing Separator and Partial Deboner**

The following is a list of documents enclosed:

Examiner: Parsley, David J.

Confirmation No.: 2104

Docket No. 11953-1960

Group Art Unit: 3643

Return Postcard Amendment Transmittal Page Amendment and Response Petition for Extension of Time - 1 month Request for Continued Examination Credit Card Authorization - \$455.

Further, the Commissioner is authorized to charge Deposit Account No. 20-0778 for any additional fees required. The Commissioner is requested to credit any excess fee paid to Deposit Account No. 20-0778.

AMENDMENT TRANSMITTAL LETTER (SMALL) Applicant(s): Leen Holleman					Docket No. 11953-1960					
Serial No. 10/766,123	Filing Dat 01-28-200	I I	Examiner Co Parsley, David J.		onfirmation No. 2104		Group Art Unit 3643			
Invention: Poultry Wing Separator and Partial Deboner										
Commissioner for Patents Mail Stop RCE P.O. Box 1450 Alexandria VA 22313-1450 Transmitted herewith is an Amendment and Response in the above-identified application. The fee has been calculated and is transmitted as shown below										
CLAIMS AS AMENDED										
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EX CLAIMS PRE		RATE		ADDITIONAL FEE			
TOTAL CLAIMS	13 -	20 =	0	-	X	\$25.00	\$0.00			
INDEP. CLAIMS	3 -	3 =	0		X \$100.00		\$0.00			
Multiple Dependent	Claims (check if app	licable)				\$180.00	\$			
EXTENSION FEE	1 ST MONTH ⊠ \$60.00	2 ND MONTH	3 RD MONTH \$510.00	;	4 [™] MONTH ☐ \$795.00		\$60.			
Other Fees: RCE							\$395.			
	\$0.00									
No additional fee is required. Please charge Deposit Account No. in the amount of . A duplicate copy of this page is enclosed. A check in the amount of to cover the filing fee is enclosed. A Credit Card Payment Form PTO-2038 is attached in the amount of \$455 The Director is hereby authorized to charge any deficiencies of the above fees or credit any overpayment to Deposit Account No. 20-0778. Account No. 20-0778. Date										